

## BASEBALL BEAUMONT CHAPTER

## **SCHOLARSHIP APPLICATION**

FULL NAME:	DOB:
(Do not use nicknames)	
Home Address:	
Home Phone:	Cell Phone:
E-Mail Address:	
High School:	
	HS ranking
Head Baseball Coach:	Phone:
College you plan to attend:	
Parents/Guardian:	
Dad's Occupation:	
Mom's Occupation:	

How many children in your family \_\_\_\_\_ Ages \_\_\_\_\_ In College\_\_\_\_

What financial assistance will your family be able to provide for you to attend college? \_\_\_\_\_

List other scholarships awarded\_\_\_\_\_

What are your main interests outside of school? \_\_\_\_\_\_

List all organizations to which you have belonged: \_\_\_\_\_

If awarded with this scholarship from TASO Baseball Beaumont Chapter, will you be able attend the awards presentation in January (usually the first Wednesday)? YES\_\_\_\_NO\_\_\_\_

If awarded with this scholarship from TASO Baseball Beaumont Chapter, you NEED to be able attend the Memorial Scholarship Games in June. (Usually the Monday and Tuesday after Baseball Championship games at Austin and Round Rock, Texas)

## **REQUIRED PAPERS FOR REVIEW**

**\*\*Please include a short essay explaining why you should be selected for our TASO Scholarship.** 

\*\* In order to receive your scholarship, we MUST receive proof of enrollment in a College or University.

**\*\***Please have your high school counselor attach a copy of your transcript, test scores, attendance and any special comments.

**\*\***Please attach at least three (3) letters of recommendation with this application. One letter MUST be from your head baseball coach.

**\*\*** Failure to meet ALL of the above requirements will result in disqualification of this application for review!

Signature of Applicant\_\_\_\_\_

APPLICATION MUST BE <u>POST MARKED</u> ON OR BEFORE <u>June 1</u>. APPLICATION RECEIVED AFTER THIS DATE WILL NOT BE REVIEWED.

## MAIL TO: SCHOLARSHIP SELECTION COMMITTEE TASO BASEBALL BEAUMONT CHAPTER P.O. BOX 22237 BEAUMONT, TEXAS 77720